ENTRY BLANK REJECTED FROM PLEASE TYPE OR PRINT Entered previous May Show ves no Ms. Mr. Artist JAMES P GIDDINGS Permanent 909 WHITEY CLEVE. HEIGHTS Address _ 291-3503 44112 Tel. (216) Area Code Zip Temporary Address __ Street City Tel. (Zip Permanent address is in what county? CUPAHOGA Born in Cuyahoga County

Yes
No Collaborator __ If May Show entries are not accepted or not sold: M Artist will pick up at Museum. Museum should dispose of. Museum should ship to artist C.O.D. at this address: **Special Instructions** When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until January 2, 1977.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature James P. Middings

ENTRY BLAN	KS				•	v. •	
☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography ☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts							
Medium or Materials							
TRANS. WATERCOLOR							
Title SUMMER STEPS							
Price or NFS	16 1150 0 1			Size 383/4" × 26 (INSIDE)			
*650. IT NES ONLY				48" ×33" (ourside)			
GRAPHICS AND PHOTOGRAPHY ONLY							
Additional No. For Sale		Total No. in Edition	Price Unframed		Price of Frame		
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Price or NFS	Insurance Value Size 25" x 39" (IA		(INSIDE)				
\$650. If NFS Only 33"4" x 47" (OUTS)				UTSIDE)			
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1976 MAY SHOW

The Cleveland Museum of Art Cleveland, Ohio 44106

Dates for Pick-up of Objects

Museum Service Entrance 9:30 a.m. to 4:30 p.m., Monday through Saturday

Rejected Objects
November 15 through November 27

Accepted Objects

January 10 through January 15

It is understood that the Museum will have the right to dispose for its own account any object not called for by the dates listed.

Please keep address within this box for window envelope.

Name	JAMES P. GIDDINGS
Address	909 WHITET RD.
City & State	CLEVELAND HTS., OH Zip 44112

PLEASE TYPE OR PRINT.

This is the label that will be used to mail your notification of acceptance or rejection.

ACCEPTANCE OR REJECTION NOTICE
This is your only receipt to claim your object(s). This notification will be mailed to you following judging. 16 DO NOT DETACH
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Medium or Materials
TRANSPARENT WATERCOLOR
Title SUMMER STEPS SAOL
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2 □ 1. Paintings □ 2. Graphics □ 3. Photography □ 4. Sculpture □ 5. Electric □ 6. Crafts
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